

Immunization Registry Progress in Alaska

Note: Unless otherwise stated, the information in this fact sheet was obtained from data and information submitted by the program manager or representative from the immunization program in Alaska. June 1999.

Immunization Coverage in Alaska:

According to National Immunization Survey (NIS) data for July 1997 to June 1998, the percentage of children 19-35 months of age who were up-to-date with 4 doses of diphtheria, tetanus, pertussis, 3 doses of poliomyelitis, 1 dose of measles, mumps, rubella, and 3 doses of *Haemophilus influenzae* type b vaccine was 79%. This is a full 10percentage points above Alaska's coverage levels for the same vaccines in the 1996 NIS.

Facts about Alaska's Resource and Patient Management System (RPMS):

- RPMS collects and manages immunization data and other medical information for all persons receiving services in the public sector in Alaska.
- The target age for RPMS is patients of all ages.
- Immunization registries, which are integrated with other information systems are more efficient and sustainable, because records can be consolidated and redundant information only needs to be entered once. Currently entities which link with the registry include:
 - Newborn Screening Program
 - Blood Lead Screening Program
 - Early Periodic Screening, Diagnosis, and Treatment Program
 - Medicaid Management Information System
 - Indian Health Service
 - Public Health Clinic Patient Management/Billing System
- As of April 1999:
 - 39.7% of children less than 6-years old were enrolled in the registry.
 - 19.3% of all providers were enrolled in the registry.

Other unique qualities about RPMS:

RPMS is not an "Immunization Registry" per se. Rather, immunization information on all children receiving services via public health or Indian Health Service/tribal corporations is included in RPMS. The entire medical record of the patient (not just immunizations) is included in RPMS.

Other registry plans, accomplishments, and successes:

An Immunization Registry Work Group was established to consider the pros and cons of implementing a registry in Alaska. Additionally, DHSS staff have visited Oregon and Washington to examine the functioning of their registries, consider implementation and maintenance costs, etc.

The Division of Public Health believes the goal of an effective, efficient, comprehensive statewide immunization registry is laudable. However, Alaska is concerned about the state's current ability to achieve such a goal. The Division of Public Health is committed, however, to

exploring opportunities to test the feasibility/practicality of *local* community registries which are adaptations of successful projects that have been proven to be valuable.

Some challenges and barriers affecting registry progress:

Alaska remains concerned about several aspects of registry implementation:

- The substantial time commitment needed to make a registry successful, which could prove detrimental to other program activities.
- The cost of implementing a registry during a time of major cuts in federal funding.
- The lack of consensus over the definition of a “registry”, i.e., what components should be included.
- The difficulty in finding solutions to issues such as confidentiality, costs, costs/benefits, acceptability to the public, and securing/maintaining active participation among both public and private providers.

Helpful immunization and immunization registry contacts in Alaska:

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In addition, the Immunization Registry Workgroup, which represents a cross-section of both public and private immunization providers, may be a useful contact. Dr. Middaugh or Ms. Wood can provide contact information for the Workgroup members.